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CONFIRMATION NO. 4931

SERIAL NUMBER 09/542,942	FILING OR 371(c) DATE 03/31/2000 RULE	CLASS 345	GROUP ART UNIT 2629	ATTORNEY DOCKET NO. M0635/7065 (RJK)
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/127,655 04/02/1999

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 06/23/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	MA	4	34	4
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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TITLE

HAPTIC INTERFACE SYSTEM FOR COLLISION DETECTION AND APPLICATIONS THEREFORE

FILING FEE RECEIVED 2048	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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